## FORM D

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Washington, DC

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

142	[55]
OMB APPE	ROVAL
OMB Number: Expires: Ar	3235-0076 oril 30, 1991
Estimated avera-	ge burden
hours per respoi	nse 16.00

SEC USE ONLY						
Prefix		Serial				
DA	E RECEIV	ED				

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  SUNDAY IN THE PARK NY LLC  Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)  Type of Filing: New Filing Amendment  A. BASIC EDENTIFICATION DATA  1. Enter the information requested about the issuer  Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Sunday in the Park NY LLC  Address of Executive Offices (Number and Street, City, State, Zip Code)  Address of Principal Business Operations (Number and Street, City, State, Zip Code)  If elephone Number (1ncluding Area Code)  Gif different from Executive Offices)  Brief Description of Business  Financier of the extension of the Roundabout Theatre's Broadway production of the dramatico-musical work entitled "Sunday in the Park with George"  Type of Business Organization  Corporation  Limited partnership, already formed  Dimited partnership, to be formed	Actual or Estimated Date of Incorporation or Organization:    Month   Year	· - · · · · · · · · · · · · · · · · · ·	JUN 1 2 2008 LOMSON REUTERS
SUNDAY IN THE PARK NY LLC  Filing Under (Check box(es) that apply):	corporation limited partnership, already formed	Other (please specify):	, KOOLOOLD
SUNDAY IN THE PARK NY LLC  Filing Under (Check box(es) that apply):   Rule 504 Rule 505 Rule 506 Section 4(6)  Type of Filing:   New Filing Amendment  A. BASIC EDENTIFICATION DATA  1. Enter the information requested about the issuer  Name of Issuer (  check if this is an amendment and name has changed, and indicate change.)  Sunday in the Park NY LLC  Address of Executive Offices (Number and Street, City, State, Zip Code)  Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)	Financier of the extension of the Roundabou	• •	
SUNDAY IN THE PARK NY LLC  Filing Under (Check box(es) that apply):   Rule 504  Rule 505  Rule 506  Section 4(6)  ULOE  Type of Filing:  New Filing  A. RASIC EDENTIFICATION DATA  1. Enter the information requested about the issuer  Name of Issuer ( Check if this is an amendment and name has changed, and indicate change.)  Sunday in the Park NY LLC  Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number 14 (Number and Street, City, State, Zip Code) Telephone Number 14 (Number and Street, City, State, Zip Code) Telephone Number 15 (Number and Street, City, State, Zip Code) Telephone Number 16 (Number and Street, City, State, Zip Code) Telephone Number 16 (Number and Street, City, State, Zip Code)		de) Telephone Number (Inclu	ding Area Code)
SUNDAY IN THE PARK NY LLC  Filing Under (Check box(es) that apply):   Rule 504  Rule 505  Rule 506  Section 4(6)  ULOE  Type of Filing:  New Filing  A. RASIC EDENTIFICATION DATA  1. Enter the information requested about the issuer  Name of Issuer ( Check if this is an amendment and name has changed, and indicate change.)  Sunday in the Park NY LLC  08047514			_
SUNDAY IN THE PARK NY LLC  Filing Under (Check box(es) that apply):   Rule 504  Rule 505  Rule 506  Section 4(6)  ULOE  Type of Filing:  New Filing  Amendment	Sunday in the Park NY LLC		08047514
SUNDAY IN THE PARK NY LLC  Filing Under (Check box(es) that apply):   Rule 504  Rule 505  Rule 506  Section 4(6)  ULOE  Type of Filing:  New Filing  Amendment	<u> </u>		
SUNDAY IN THE PARK NY LLC  Filing Under (Check box(es) that apply):   Rule 504  Rule 505  Rule 506  Section 4(6)  ULOE		ATA DIONA	ALAL IPIN ARIO BIRD IN THE CONTROL OF THE CONTROL O
SUNDAY IN THE PARK NY LLC		506	OE
	SUNDAY IN THE PARK NY LLC		

## **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, fallure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: · Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business of Residence Address (Number and Street, City, State, Zip Code) ☐ Director ☐ General and/or ☐ Executive Officer Check Box(es) that Apply: Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Codé) Business or Residence Address □ Beneficial Owner ☐ Director ☐ General and/or Check Box(es) that Apply: Promoter ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐. Ceneral and/or Check Box(es) that Apply: | Promoter | | Beneficial Owner | D Executive Officer □ Director Managing Partner Pull Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

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i. Has	the issuer	sold, or d	oes the iss	uer intend	to sell, to	DOD-BOOTS	dited inve	stors in th	is offering	?	*****	Yes	No Ø
					in Append					•		_	
2. Wha	n is the mi	nimum in										. s_N/.	Α
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	e (Last nar												
					N/A								
Business o	or Residence	e Address	(Number	and Street	, City, Sta	ite, Zip Co	ode)	<del></del>					
Name of A	Associated	Broker or	Dealer	<del></del> -				<del></del>		<del></del>			<u> </u>
States in \	Which Pers	ion Listed	Has Solic	ited or Int	ends to So	bicit Purch	hasers			<del></del>			<u>.                                    </u>
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[IL]	į IN į	(AI)	[KS]	[KY]	[LA]	[ME]	[MD]	(MA)	[MI]	[MN]	[MS]	(MO)	
[MT]	[NE]	[NV]	[NH]	[ NJ ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	{PA}	
[RI]	[ SC ]	[SD]	[TN]	[TX]	[UT]	[VI]	[VA]	[WA]	[WV]	[WI]	[WY]	PR }	
		<u>.</u>	individual						· <u> </u>		· 		
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Business of All States in V (Check [AL] [R]) Full Name Business of All States in V (Check [AL]	Which Pers  "All State:  [AK]  [NE]  [SC]  (Last name  Associated  Which Pers  "All State:  [AK]	Broker or  Son Listed  s'' or chec  {AZ}  {IA}  {NV}  [SD]  ne first, if  the Address  Broker or  son Listed  s'' or chec  {AZ}	(Number  Dealer  Has Solice  k individus  [KS]  [NH]  [TN]  individual  (Number  Dealer  Has Solice  k individus  [AR]	and Street  ited or Int al States) {CA} {NJ} {TX}  and Street	ends to So  [CO] [LA] [NM] [UT]  t, City, Su  ends to So [CO]	[CT] [ME] [NY] [VT]  ate, Zip Co	(DE) (MD) (NC) (VA) ode)	[MA] [ND] [WA]	[M] [OH] [WV]	[MN]	[MS] [OR] [WY]	ID (MO) (PA) (PR)	) ) ) )
Business of All States in V (Check [AL] [R]) Full Name Business of All States in V (Check in V	Which Personal States (AK) [IN] [NE] [SC] e (Last name Associated Which Personal States (AR) States	Broker or  Son Listed  s'' or chec  {AZ}  {IA}  {NV}  [SD]  ne first, if  the Address  Broker or  son Listed  s'' or chec	(Number  Dealer  Has Solici k individu [AR] [KS] [NH] [TN]  individual  (Number  Dealer  Has Solici k individu	and Street  ited or Int al States) { NJ } { TX }  and Street	ends to So  [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	(DE) (MD) (NC) (VA)	[MA] [ND] [WA]	(M) (OH) (WV)	[MI]	[MS] [OR] [WY]	ID (MO) IPA (PR)	State

### 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold 0 0 0 Equity..... ☐ Common ☐ Preferred 0 0 Partnership Interests ..... Other (Specify Limited Liability Investments ) \$1,800,000 1,500,000 s 1,500,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases 1,500,000 Accredited Investors 0 Non-accredited Investors..... Total (for filings under Rule 504 only) ..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Security Sold Type of offering N/A N/A Regulation A..... N/A N/A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future confingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 0 Transfer Agent's Fees ..... 500 Printing and Engraving Costs ..... 8,000 Legal Fees ..... 1,000 O Engineering Fees .... 0 Sales Commissions (specify finders' fees separately)..... Other Expenses (identify) \_ 9,500

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Total .....

_	C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES AND	USE	OF PROCEED	15		
	b. Enter the difference between the aggregate offetion I and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference	is the			<u>s_1,</u>	490,500
	Indicate below the amount of the adjusted gross pused for each of the purposes shown. If the amou estimate and check the box to the left of the estimat the adjusted gross proceeds to the issuer set forth	nt for any purpose is not known, furni e. The total of the payments listed must	sh an equal			P	ayments To Others
	Salaries and fees	•	П «	0	EJ.	\$	17,000
	Purchase of real estate	•				<u> </u>	0
	Purchase, rental or leasing and installation of						
	Construction or leasing of plant buildings and					<u> </u>	_
	Acquisition of other businesses (including the	value of securities involved in this					-
	issuer pursuant to a merger)					<b>S</b>	
	Repayment of indebtedness		D 5.	0		<b>S</b>	0
	Working capital	·····	<b>□ \$</b> .	0	Ø	\$ <u>1,4</u>	173,500
	Other (specify):	<del></del>	<b>□ \$</b> .	0		<b>s</b>	0
		····	<b>D</b> \$.	0		\$	0
	Column Totals	• • • • • • • • • • • • • • • • • • • •	<b>-</b> 5.	0	Ø	<b>S</b> 1,4	90,500
	Total Payments Listed (column totals added) .			✓ \$ 1,49	0,500		
	·	. FEDERAL SIGNATURE					
ollo	issuer has duly caused this notice to be signed by t wing signature constitutes an undertaking by the is- t of its staff, the information furnished by the issu	suer to furnish to the U.S. Securities an	d Exc	hange Commiss	ion,	upo	n written re-
is uc	r (Print or Type)	Signature 1 2010	11	A Date			<del></del> .
Su	nday in the Park NY LLC	Just Just	V	[]   5	/22/	80	
	e of Signer (Print or Type) pert Boyett Theatricals LLC	Title of Signer (Print or Type)					
	Robert Boyett	Manager of Managing l	Mem	ber			

-ATTENTION

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	S. STATE SIGNATURE
	52(c), (d), (e) or (f) presently subject to any of the disqualification provisions Yes No
	See Appendix, Column 5, for state response.
2. The undersigned issuer hereby undertake Form D (17 CFR 239.500) at such times	s to furnish to any state administrator of any state in which this notice is filed, a notice on as required by state law.
<ol><li>The undersigned issuer hereby undertake issuer to offerees.</li></ol>	s to furnish to the state administrators, upon written request, information furnished by the
Smited Offering Exemption (ULOE) of t	se issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform the state in which this notice is flied and understands that the issuer claiming the availability ablishing that these conditions have been satisfied.
•	ws the contents to be true and has duly caused this notice to be signed on its behalf by the
Issuer (Print or Type)	Signature Date
Sunday in the Park NY LLC	10her 7 5/22/08
Name (Print or 1)pe) Robert Boyett Theatricals LLC	Title (Print or Type)  Manager of Managing Member

By: Robert Bovett

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Print of Print of the name and title of the signing representative under his signature of the state portion of this form. One copy of every notice on Print of the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Print of the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Print of the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Print of the name and title of the signing representative under his signature for the state portion of this form.

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		3  Type of security		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)				
			and aggregate offering price offered in state (Part C-Item!)	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL								ļ	<u> </u>
AK								<u> </u>	<u> </u>
AZ								<u></u>	<u> </u>
AR								<u> </u>	<u> </u>
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СŢ						<u> </u>			ļ <u>.</u>
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DC									ļ
FL				<u> </u>					<u> </u>
GA				<u> </u>					<u> </u>
HI				<u></u>					
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MS	<b></b>								

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ENDIX **
The state of the s

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	to non-a	to sell ccredited in State Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
МТ						<u> </u>		-			
NE							<del></del>				
NV											
NH								ļ			
נא								<u> </u>			
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NY		Х	LC Interests 11,000,000	3	1,000,000	0	<u> </u>	<u> </u>	X		
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